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TRANSMITTAL FORM		Application Number		lection of information unless it displays a valid OMB control number. 10/595,825		
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(to be used for all correspondence after initial filing)		Examiner Name	lmani N. H	Imani N. Hayman		
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Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/doc Extension of Time Re Express Abandonne Information Disclosur Certified Copy of Pric Document(s) Reply to Missing Par Incomplete Applicati	claration(s)	prawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Altomey, Revocat Change of Correspondence Ferminal Disclaimer Request for Refund DD, Number of CD(s)  Landscape Table on 0 ks a	Address		After Allowance Communication to TC Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Monice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below):	
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT						
Firm Name KNOBLE YOSHIDA & DUNLEAVY, LLC						
Signature /Grace S. Doe/						
Printed name Grace S. Doe						
Date February 18, 2009			Reg. No.	59,257	7	
sufficient postage as first clast the date shown below:	espondence is being facsing		TO or depos	ited with	h the United States Postal Service with k 1450, Alexandria, VA 22313-1450 on	
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